

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the Application of **Steinberg**

Application No. 10/076,858

Attorney Docket No. Shipley 03-19; DN: 51969 (ACT - 183/184)

Filed: February 14, 2002

For: **MICROMACHINED STRUCTURES
MADE BY COMBINED WET AND
DRY ETCHING**

Examiner: Stephen J. Stein

Group Art Unit: 1775

CERTIFICATE OF MAILING UNDER 37 C.F.R § 1.8(a)

I hereby certify that this Correspondence is being deposited on the date identified below with the United States Postal Service as first-class mail in an envelope properly addressed to Commissioner for Patents, Alexandria, VA 22313-1450

2/12/2004

Date of Certificate

Cristin Donahue
Cristin Donahue

Commissioner for Patents
Alexandria, VA 22313-1450

**INFORMATION DISCLOSURE STATEMENT
UNDER 37 C.F.R. § 1.97**

In compliance with the duty of disclosure set forth in 37 C.F.R. § 1.56, Applicants are submitting herewith a Form PTO-1449 and a copy of the references listed thereon. This Information Disclosure Statement is being filed more than three months after the filing date of this application, and after receipt of the first Official Action on the merits, but before receipt of a Final Official Action or an Notice of Allowance. Accordingly, the fee required under 37 C.F.R. 1.97(c) is enclosed. In the event the enclosed fee is in error, the Commissioner is authorized to charge any underpayment or credit any overpayment to Deposit account no. 04-1406.

Applicants respectfully request full and proper consideration of the listed information during examination of the application, and that the listed information be

02/23/2004 WABDEIR1 00000024 10076858
01 FC:1606
180.00 OP

printed on any patent that issues therefrom.

Respectfully submitted,

DANN, DORFMAN, HERRELL & SKILLMAN
A Professional Corporation
Attorneys for Applicant(s)

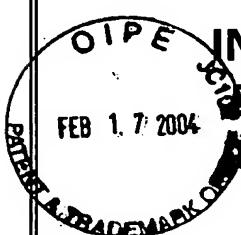
By 
Niels Haun
PTO Registration No. 48,488

Telephone: (215) 563-4100

Facsimile: (215) 563-4044

Enclosures - Form PTO-1449

Copies of references listed on PTO - 1449



INFORMATION DISCLOSURE STATEMENT

FEB 17 2004

SHEET 1 OF 1

Complete if known

Application Number: 10/076,858

Filing Date: February 14, 2002

First Named Inventor: Steinberg

Group Art Unit: 1775

Examiner Name: Stephen J. Stein

Attorney Docket Number: Shipley 03-19

UNITED STATES PATENT DOCUMENTS

EXAMINER'S INITIALS	CITE NO.	PATENT NUMBER	ISSUE DATE MM-DD-YYYY	FIRST NAMED INVENTOR
		4706061	11/10/1987	Johnson
		4784721	11/15/1988	Holmen et al.
		4837129	06/06/1989	Frisch et al.
		4945400	07/31/1990	Blonder et al.
		5384872	01/24/1995	Jacobs-Cook et al.
		5760305	06/02/1998	Greiff

FOREIGN PATENT DOCUMENTS

EXAMINER'S INITIALS	CITE NO.	DOCUMENT NUMBER	COUNTRY OR REGION	DATE OF PUBLICATION MM-DD-YYYY	FIRST NAMED INVENTOR OR APPLICANT
		WO 03/008139	WO	01/30/2003	Steinberg et al.

OTHER PRIOR ART - NON-PATENT DOCUMENTS

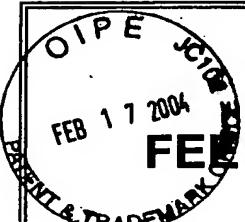
EXAMINER'S INITIALS	CITE NO.	Include name of the author (in Capital Letters), title of the article (when appropriate), title of the item(book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published
		Marc Madou, "Fundamentals of Microfabrication", CRC Press, pp. 174-178, 1997.

EXAMINER'S SIGNATURE		DATE CONSIDERED	
----------------------	--	--------------------	--

EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP §609. Draw a line through citation if citation not in conformance and reference not considered. Include a copy of this form with next communication to applicant.

Emoje

1775 A



FEEDBACK TRANSMITTAL

 <p>FEE TRANSMITTAL</p>	<i>Complete if known</i>	
	Application Number: 10/076,858	
	Filing Date: February 14, 2002	
	First Named Inventor: Steinberg	
	Group Art Unit: 1775	
	Examiner Name: Stephen J. Stein	
Total Amt. of Payment: (1)+(2)+(3)=	\$180	
Attorney Docket Number: Shipley 03-19; DN: 51969 (ACT - 183/184)		

METHOD OF PAYMENT (check one)		FEE CALCULATION (continued)																					
1. The Commissioner is hereby authorized to: <input type="checkbox"/> Charge indicated fees <input checked="" type="checkbox"/> Charge additional fees <input checked="" type="checkbox"/> Credit overpayments to the account of DANN, DORFMAN, HERRELL & SKILLMAN Deposit Account Number <u>04-1406</u>		ADDITIONAL FEES Fee Description Fee Paid Surcharge-late filing fee or oath _____ Surcharge - late provisional filing fee or cover sheet _____ Extension for response within first month _____ Extension for response within second month _____ Extension for response within third month _____ Extension for response within fourth month _____ Notice of Appeal _____ Filing a brief in support of an appeal _____ Request for oral hearing _____ Petition to revive unavoidably abandoned application _____ Petition to revive unintentionally abandoned application _____ Issue fee _____ Petitions to the Commissioner _____ Petitions related to provisional applications _____ Submission of Information Disclosure Stmt. _____ 180 Recording each patent assignment per property _____ Other fee (specify) <u>Advance Order (10 copies)</u> _____ Other fee (specify) _____ SUBTOTAL (3) <u>\$180</u>																					
2. Payment enclosed: Check in the amount of <u>\$180</u>																							
FEE CALCULATION																							
1. FILING FEE		Fee																					
Fee Description Utility filing fee _____ Design filing fee _____ Plant filing fee _____ Reissue filing fee _____ Provisional filing fee _____																							
		SUBTOTAL (1) <u>\$0</u>																					
2. Claims <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th style="text-align: center;">Paid</th> <th style="text-align: center;">Extr</th> <th style="text-align: center;">Fee</th> </tr> </thead> <tbody> <tr> <td>Total Claims</td> <td style="text-align: center;">- = 0</td> <td style="text-align: center;">x 9 = 0</td> <td style="text-align: center;">= 0</td> </tr> <tr> <td>Independent Claims</td> <td style="text-align: center;">- = 0</td> <td style="text-align: center;">x 42 = 0</td> <td style="text-align: center;">= 0</td> </tr> <tr> <td>Multiple Dependent (First presentation)</td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td style="text-align: center;">SUBTOTAL (2) <u>\$0</u></td> </tr> </tbody> </table>					Paid	Extr	Fee	Total Claims	- = 0	x 9 = 0	= 0	Independent Claims	- = 0	x 42 = 0	= 0	Multiple Dependent (First presentation)							SUBTOTAL (2) <u>\$0</u>
	Paid	Extr	Fee																				
Total Claims	- = 0	x 9 = 0	= 0																				
Independent Claims	- = 0	x 42 = 0	= 0																				
Multiple Dependent (First presentation)																							
			SUBTOTAL (2) <u>\$0</u>																				
COPY																							

Submitted By:

Typed or

Printed Name Niels Haun

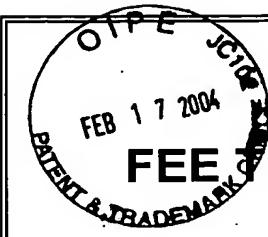
Reg. Number 48,488

Deposit Account User ID

[Signature]

© 2000 by Kluwer Academic Publishers.

posit Account User ID



FEE TRANSMITTAL

OTPE FEB 11 2004 SC104 PATENT & TRADEMARK		<i>Complete if known</i>	
		Application Number: 10/076,858	
		Filing Date: February 14, 2002	
		First Named Inventor: Steinberg	
		Group Art Unit: 1775	
		Examiner Name: Stephen J. Stein	
Total Amt. of Payment: (1)+(2)+(3)= \$180		Attorney Docket Number: Shipley 03-19; DN: 51969 (ACT - 183/184)	

METHOD OF PAYMENT (check one)		FEES CALCULATION (continued)																					
1. The Commissioner is hereby authorized to: <input type="checkbox"/> Charge indicated fees <input checked="" type="checkbox"/> Charge additional fees <input checked="" type="checkbox"/> Credit overpayments to the account of DANN, DORFMAN, HERRELL & SKILLMAN Deposit Account Number <u>04-1406</u>		ADDITIONAL FEES Fee Description Fee Paid Surcharge-late filing fee or oath _____ Surcharge - late provisional filing fee or cover sheet _____ Extension for response within first month _____ Extension for response within second month _____ Extension for response within third month _____ Extension for response within fourth month _____ Notice of Appeal _____ Filing a brief in support of an appeal _____ Request for oral hearing _____ Petition to revive unavoidably abandoned application _____ Petition to revive unintentionally abandoned application _____ Issue fee _____ Petitions to the Commissioner _____ Petitions related to provisional applications _____ Submission of Information Disclosure Stmt. _____ Recording each patent assignment per property _____ Other fee (specify) <u>Advance Order (10 copies)</u> _____ Other fee (specify) _____ SUBTOTAL (3) <u>\$180</u>																					
Fee Calculation 1. FILING FEE Fee Description Fee Utility filing fee _____ Design filing fee _____ Plant filing fee _____ Reissue filing fee _____ Provisional filing fee _____ SUBTOTAL (1) <u>\$0</u>		180																					
2. Claims <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th style="text-align: center;">Paid</th> <th style="text-align: center;">Extr</th> <th style="text-align: center;">Fee</th> </tr> </thead> <tbody> <tr> <td>Total Claims</td> <td style="text-align: center;">- = 0</td> <td style="text-align: center;">x 9 = 0</td> <td style="text-align: center;">0</td> </tr> <tr> <td>Independent Claims</td> <td style="text-align: center;">- = 0</td> <td style="text-align: center;">x 42 = 0</td> <td style="text-align: center;">0</td> </tr> <tr> <td>Multiple Dependent (First presentation)</td> <td colspan="3"></td> </tr> <tr> <td></td> <td colspan="3" style="text-align: right;">SUBTOTAL (2) <u>\$0</u></td> </tr> </tbody> </table>			Paid	Extr	Fee	Total Claims	- = 0	x 9 = 0	0	Independent Claims	- = 0	x 42 = 0	0	Multiple Dependent (First presentation)					SUBTOTAL (2) <u>\$0</u>				
	Paid	Extr	Fee																				
Total Claims	- = 0	x 9 = 0	0																				
Independent Claims	- = 0	x 42 = 0	0																				
Multiple Dependent (First presentation)																							
	SUBTOTAL (2) <u>\$0</u>																						

Submitted By:

Typed or

Printed Name Niels Haun

Reg. Number 48,488

Signature Niels Haun

Date February 12, 2004

Deposit Account User ID

04-1406